PTO/SB/83 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	1101114974
Filing Date	2-1-2003
First Named Inventor	Kimberly Hei
Art Unit	17104
Examiner Name	Ellen McAvay
Attorney Docket Number	163 HOYUSCA

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Please withdraw me as attorney or agent for the above identified patent application, and all the attorneys/agents of record. the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.
The reasons for this request are:
I will be employed by the PTO as a Patent Examiner effective January 22, 2007.
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Date 1-21-7 Telephone No. (651)338-2626 NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration

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